## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications) PCT/DE99/00052

ATTORNEY'S DOCKET NUMBER **P00,1316** 

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## "METHOD FOR CALIBRATING AN ENGRAVING AMPLIFIER"

the specificati	on of which (ch	neck only one item below):		
	is attached he	ereto.		
		Inited States application		
	on			
	and was amer	nded		
	on		(if applicable)	•
⊠	was filed as P	CT international application		
	Number	PCT/DE99/00052		
	on	15 January 1999		
	and was amer	nded under PCT Article 19		
	on		(if applicable)	
•		ewed and understand the conducted by any amendment referre	tents of the above-identified sp ed to above.	ecification,
		sclose information which is made of Federal Regulations, §1.	terial to the examination of this 56(a).	s application in
for patent or in other than the application(s) one country of	nventor's certificularies of United States of for patent or invented the United States of the	icate or of any PCT internation of America listed below and have ventor's certificate or any PCT	d States Code, §119 of any for al application(s) designating at ave also identified below any for international application(s) des y me on the same subject matt imed:	least one country breign signating at least
PRIOR FOREIG	N/PCT APPLICA	ATION(S) AND ANY PRIORITY	CLAIMS UNDER 35 U.S.C. 11	9:
COUNTRY (if PCT indicate "PCT")		APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
GERMANY		198 01 472.4	16 January 1998	■ YES □ NO
				☐ YES □ NO
				□ YES □ NO
				□ YES □ NO
				□ YES □ NO

## Combined Declaration For Pater (Includes Reference to PCT Internationals)

## olication and Power of Attorney (Contications) PCT/DE99/00052

	_
i (	Α
	P
	•

ATTORNEY'S DOCKET NO. P00,1316

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject mater of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, Untied States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

		U.S. APPLICATIONS			STATUS (Check		
	U.S. APPLICAT	ION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDO	
	DCT ADI	PLICATIONS DESIGNATING T	THE II S				
	FCI AII	EICATIONS DESIGNATING 1	112 0.3.			1	
PCT APPLICATION NO		PCT FILING DATE	PCT FILING DATE U.S. SERIAL NUMBERS ASSIGNED (if any)				
M. Barrett David R. I (35,332), I	, ( <u>30,142</u> ) Steven H. N. Metzger (32,919), Todd	named inventor, I hereby apported to the control of	9,927), Robert M. Ward (26,5 Hobart (24,149), Melvin A. Ro	517), Brett A. Valiquet (obinson (31,870), John	( <u>27,841</u> ), Edward <i>A</i> R. Garrett (27,888)	A. Lehman (2: ), Joseph P.	
Send Cor	respondence to:					Direct Telephone Calls to	
<u>HILL &amp; SIMPS</u> A Professional Cor 85th Floor Sears Tower, Chic			oration		312/876-0200 Ext. <u>3844</u>		
1-00	FULL NAME OF INVENTOR	FAMILY NAME Weidlich	FIRST GIVEN NA Ermst-Rudolf		SECOND GIVEN Gottfried	NAME	
2 0	RESIDENCE & CITIZENSHIP	Kiel DEX	STATE OR FORE GERMANY	EIGN COUNTRY	COUNTRY OF CITIZENSHIP GERMANY		
1	POST OFFICE ADDRESS	POST OFFICE ADDRESS Fliegender Holländer 29	24159 Kiel			STATE & ZIP CODE/COUNTRY GERMANY	
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NA	FIRST GIVEN NAME SECOND G		NAME	
2 0 2	RESIDENCE & CITIZENSHIP	CITY	STATE OR FORE	STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	СІТУ		STATE & ZIP CODE/COUNTRY	
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NA	FIRST GIVEN NAME		SECOND GIVEN NAME	
	RESIDENCE &	CITY	STATE OR FORE	EIGN COUNTRY	COUNTRY OF C	ITIZENSHIP	
2 0 3	CITIZENSHIP						

DATE

SIGNATURE OF INVENTOR 203

DATE